

EXHIBIT K

DECLARATION OF DR. NICOLE MCCANTS

1. I am a doctorate-level physical therapist with 5 years of experience. I am currently practicing at Advanced Neurologic Rehabilitation in Maricopa County, Arizona.
2. I served as the physical therapist for the twin boys, Dylan and Kenan Kahraman, during the latter months of 2018.
3. At the time, both boys were six years old. They had a history of developmental disorders and frequent tripping and falling at school. Both presented at different times with pains in their lower extremities.
4. My notes state that their naturopath suspected their symptoms could be related to the GAPS diet; Mother emailed me shortly thereafter to clarify the naturopath believed it was due to absorption issues that the GAPS diet was intended to address. Their parents were trying to increase their intake of micronutrients but were challenged in their efforts by the children's food sensitivities.
5. I first met with Dylan on October 8, 2018. At that time, he was having severe difficulties ambulating and was virtually confined to a wheelchair. It was reported that he had experienced an injury that summer.
6. After working with Dylan over the course of the next month, I saw some mild improvements in his muscle strength, but he was still moderately functionally impaired. He could not even stand to bear his full weight and complained of pain in both knees. I personally observed Dylan spontaneously experience pain as he made efforts to comply

with the physical therapy. He was also anxious about pain, sometimes crying in anticipation, and grimaced from time to time.

7. Dylan continued to improve throughout November 2018. His complaints of knee pain lessened, but he displayed a high level of apprehension towards increased physical activity.

8. By December 2018, Dylan showed improvements in strength and mobility and an improved tolerance for weight-bearing with lessened pain or discomfort. Dylan's leg and knee pain substantially decreased, and he was able to crawl, tall kneel, quadruped, stand briefly and sidestep. With assistance, he could stand for about thirty seconds and take approximately 15 steps. He still displayed weakness in his joints and became fatigued when attempting to walk a short distance. His parents had scheduled ongoing therapy twice weekly, through January 15th.

9. I first met with Kenan on October 17, 2018. He had experienced a recent fall at school and complained of pain in his right knee. On the first visit, he stood only briefly and began to cry after taking 3 steps, stating "it hurts a lot," but the concern seemed limited to the one knee. He was not comfortable balancing with lofstrand crutches.

10. By the beginning of November, Kenan was beginning to show similar symptoms to his brother, including progressive weakness in his lower extremities and requiring the assistance of a wheelchair to ambulate. On November 1, 2018 I advised the parents to take Kenan to the Emergency Room at Phoenix Children's Hospital to expedite

neurological evaluation. My notes indicate they were seen by neurology shortly thereafter.

11. Although initially isolated to the one knee, this decline in function soon included both knees and his lower legs. Kenan showed an acute reduction in the strength of his lower extremities. He experienced joint pain in both mornings and evenings and could not do a straight leg raise. I personally observed Kenan to have spontaneous pain reactions to his physical therapy work. At times, weight bearing elicited tears.

12. During the latter part of November, Kenan's complaints of knee pain lessened. He was able to bear an increased amount of weight, but was apprehensive of standing due to the possibility of pain. On one occasion, he was encouraged by watching his brother's efforts to stand.

13. By the end of November, Kenan's pain had decreased. He was able to extend his legs for longer, but his weight-bearing ability was still limited and he was still non-ambulatory, preferring to scoot around rather than crawling or walking.

14. The parents affirmed that they had worked to eliminate toxins from the children's environment and believed the boys' improvement was connected. A correlation between the two is possible, but not something I could confirm due to the limitations of my practice. Although the boys were progressing towards recovery, they still required significant therapy to recover the prior function of their knees and legs.

15. DCS never consulted me regarding my experience with either Dylan or Kenan.

I declare under penalty of perjury that the foregoing is true and correct. Signed on the
4 day of May, 2020.

Nicole McCants, PT, DPT

Nicole McCants, PT, DPT (May 5, 2020)

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Declaration of Dr. Nicole McCants

Final Audit Report

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